

IOWA DEPARTMENT OF AGRICULTURE AND LAND STEWARDSHIP

Producer Disposal Certification

Date:	
Ι,	(producer name, printed)
* 4	(address)
	(city, state, zip)
	(telephone number)
	cribed below, sampled as part of the Iowa targeted surveillance compliance with all relevant laws and rules.
Animal identification:	
Date sampled:	
County sampled:	
Veterinarian:	
Veterinarian phone number:	
Producer certification:	
Social Security Number:	
Signature:	
Submit the completed form to:	State Veterinarian Iowa Department of Agriculture 502 E. 9 th Street Des Moines, IA 50319
The \$80.00 producer incentive for	r proper carcass disposal will be sent to the producer.
FUND 3540-2	